

Hillsboro Air Traffic Control Tower Safety, HVAC, and Roof Upgrades Services Market Survey:

The Federal Aviation Administration, Northwest Mountain Region, Western Service Area, is conducting a Market Survey to improve the Government's understanding of the current marketplace and to identify capable sources. Interested sources must respond with information to confirm evidence of their qualifications and capabilities. Responses to this market survey will be used to determine if there is adequate competition to set the requirement aside for Socially and Economically Disadvantaged Businesses (SEDB/8(a)), Small Businesses, or full and open competition. This survey is being conducted in accordance with FAA Acquisition Management System (AMS) Section 3.2.1.2.1. This survey will support market research obtained from multiple sources and will be utilized for planning purposes only.

All interested vendors are advised that the FAA will not pay for any information or any administrative costs incurred that are associated with any response received from industry in response to this Market Survey/Request for Information. Therefore, any costs associated with vendor's Market Survey/Request for Information submissions will be solely at the interested vendor's expense.

SCOPE OF WORK:

The selected Contractor shall furnish all labor, product, equipment, materials, and supervision for the demolition and installation associated with the Roof Repair, HVAC Modification, and Safety Upgrade Project at Hillsboro (HIO) Airport Traffic Control Tower (ATCT) located in Hillsboro, Oregon.

"Demolition" includes but is not limited to removing and disposing of existing roof flashing and existing HVAC Heaters of the ATCT. "Installation" includes but is not limited to providing and installing new roof flashing, cableway thermal insulation and external coating, new in-duct HVAC electric heater, and a new handrail extension to the existing cat-walk handrail on the ATCT.

Location:

Federal Aviation Administration
Air Traffic Control Tower
Hillsboro Airport
Hillsboro, OR

RESPONSE TO THIS MARKET SURVEY:

Any information provided in response to this market survey will be used for informational purposes only and will not be released. Any proprietary information submitted will be protected if appropriately marked. Vendor participation in any informational session is not a promise of future business with the FAA.

Response submittals must include the following information (Submittals can be by email or fax):

- a) Name of company
- b) Address
- c) Phone and Fax number
- d) Point of contact
- e) Email address

- f) Business size status: 8(a), Small Business, SDVOSB, VSB, etc.
- g) Verification of registration in the Central Contractor's Registration (CCR)
- h) Completed Business Declaration Form

Please submit responses to the market survey by close of business (4pm, PST) on June 17, 2011.

The FAA prefers that all response submittals, including attachments, be submitted electronically to the following email at: angela.furukawa@faa.gov, or by fax to: (425) 227-1055.

If viewing this announcement from a source other than Federal Aviation Administration Contract Opportunities (FAACO), please visit <http://faaco.faa.gov/> for the original.

BUSINESS DECLARATION

1. Name of Firm: _____ Tax Identification No.: _____
2. Address of Firm: _____
3. Telephone Number of Firm: _____
4. a. Name of Person Making Declaration _____
b. Telephone Number of Person Making _____
c. Position Held in the Company _____
5. Controlling Interest in Company ("X" all appropriate boxes)
- ☐ a. Black American ☐ b. Hispanic American ☐ c. Native American ☐ d. Asian
☐ e. Other Minority (Specify) _____ ☐ f. Other (Specify) _____
☐ g. Female ☐ h. Male ☐ i. 8(a) Certified (Certification letter attached) ☐ j. Service Disabled
Veteran Small Business
6. Is the person identified in Number 4 above, responsible for day-to-day management and policy decision making, including but not limited to financial and management decisions?
☐ a. Yes ☐ b. No (If "NO," provide the name and telephone number of the person who has this _____)
7. Nature of Business (Specify all services/products) _____
8. (a) Years the firm has been in business: _____ (b) No. of Employees _____
9. Type of Ownership: ☐ a. Sole Ownership ☐ b. Partnership
☐ c. Other (Explain) _____
10. Gross receipts of the firm for the last three years: a.1. Year Ending: _____ b.1. Gross Receipts _____
a.2. Year Ending: _____ b.2. Gross _____ a.3. Year Ending: _____ b.3. Gross Receipts _____
11. Is the firm a small business? ☐ a. Yes ☐ b. No
12. Is the firm a service disabled veteran owned small business? ☐ a. Yes ☐ b. No
13. Is the firm a socially and economically disadvantaged small business? ☐ a. Yes ☐ b. No

***I DECLARE THAT THE FOREGOING STATEMENTS
CONCERNING***

***ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION,
AND BELIEF. I AM AWARE THAT I AM SUBJECT TO CRIMINAL
PROSECUTION UNDER THE PROVISIONS OF 18 USCS 1001.***

14. a. Signature _____ b. Date: _____
c. Typed Name _____ d. Title: _____